963   PEER AND RECOVERY SUPPORT TRAINING, CREDENTIALING AND SUPERVISION REQUIREMENTS

EFFECTIVE DATES: 07/01/16, 10/01/18

REVISION DATES: 06/13/18

I.   PURPOSE

This Policy applies to AHCCCS Complete Care (ACC), ALTCS E/PD, and RBHA Contractors; Fee-For-Services (FFS) Programs as delineated within this Policy including: Tribal ALTCS, TRBHA, the American Indian Health Program (AIHP); and all FFS populations, excluding Federal Emergency Services (FES). (For FES, see AMPM Chapter 1100). Services outlined in this Policy for FFS programs and populations are monitored by AHCCCS/DHCAA.

This Policy establishes requirements for the provision of peer support services within the AHCCCS programs, including qualifications, supervision, continuing education and training/credentialing of Peer and Recovery Support Specialists (PRSS).

II.   DEFINITIONS

PEER-AND-RECOVERY SUPPORT	Intentional partnerships based on shared lived experiences to provide social and personal support. This support is coupled with specific, skill-based training, coaching or assistance to bring about social or personal change at the individual, family or community level. These services can include a variety of individualized and personal goals, including living preferences, employment or educational goals and development of social networks and interests.
PEER	An individual who is, or has been a recipient of behavioral health and/or substance use treatment services and has an experience of recovery to share.
PEER SUPPORT EMPLOYMENT TRAINING PROGRAM (PSETP)	AHCCCS/OIFA approved Peer Support Employment Training Program through which individuals are credentialed by completing training and passing a competency exam.
PEER-AND-RECOVERY SUPPORT SPECIALIST (PRSS)	An individual trained, credentialed and qualified to provide peer/recovery support services within the AHCCCS Programs.

III. POLICY

A. OVERVIEW

To comport with Centers for Medicare and Medicaid Services (CMS) requirements for delivery of Peer Support Services, the AHCCCS/Office of Individual and Family Affairs (AHCCCS/OIFA) has established training requirements and credentialing standards for PRSS providing Self-Help/Peer Services (Peer Support), as described in the AHCCCS Covered Behavioral Health Services Guide. Persons with lived experience of recovery from behavioral health and/or substance use disorders serve an important role as behavioral health providers; and AHCCCS/OIFA expects consistency and quality in Peer Support services statewide.

B. PEER- AND RECOVERY SUPPORT SPECIALIST AND TRAINER QUALIFICATIONS

1. Individuals training as PRSS or seeking credentialing and employment as a PRSS shall:
   a. Self-identify as a peer, and
   b. Qualify as a behavioral health paraprofessional, behavioral health technician, or behavioral health professional.

2. Individuals meeting the above criteria may be credentialed as a PRSS by completing training and passing a competency exam through an AHCCCS/OIFA approved PSETP. Individuals are credentialed by the agency operating the PSETP. Credentialing through an AHCCCS/OIFA approved PSETP is required statewide. A Contractor shall accept credentialing from any AHCCCS-approved program.

3. Agencies may employ individuals prior to the completion of credentialing through a PSETP. However, other required trainings shall be completed prior to delivering behavioral health services (see Subsection E of this Policy). An individual shall be credentialed as a PRSS under the supervision of a qualified individual (see Subsection E of this Policy) prior to billing Peer Support Services.

4. Contractors, TRBHA, and Tribal ALTCS Programs shall ensure that individuals employed as PRSS have adequate access to continuing education relevant to Peer Support.

C. PEER SUPPORT EMPLOYMENT TRAINING PROGRAM APPROVAL PROCESS

AHCCCS/OIFA oversees the approval of all credentialing materials including curriculum and testing tools. Peer Support employment training is not a billable service for costs associated with training an agency's own employees.

Peer Support training program providers shall follow the review process as outlined below:

1. A PSETP shall submit its training curriculum, to AHCCCS/OIFA. Training curriculum materials shall include but are not limited to:
   a. Student and trainer manuals,
   b. Handouts,
   c. Homework,
   d. Final exam, and
   e. Any other classroom materials, including an explanation of accommodations or alternative formats of program materials available to individuals with special needs.

   AHCCCS/OIFA will issue feedback or approval of the curriculum material in accordance with subsection D of this policy.

2. If a program makes substantial changes (e.g. change to content, classroom time) to its curriculum or if there is an addition to required elements (see Subsection E of this Policy) the program shall submit the updated content to AHCCCS/OIFA for review and approval.

3. AHCCCS/OIFA will base approval of the curriculum, competency exam, and exam-scoring methodology only on the elements required in this Policy. If a PSETP requires regional or culturally specific training exclusive to a GSA or tribal community, the specific training cannot prevent employment or transfer of PRSS credential based on the additional elements or standards.

D. **PEER SUPPORT EMPLOYMENT TRAINING CURRICULUM STANDARDS**

1. A PSETP curriculum shall include the following core elements:
   a. Concepts of Hope and Recovery
      i. Instilling the belief that recovery is real and possible,
      ii. The history of recovery movements (e.g. Self-Help, Consumer/Survivor/Ex-Patient, Neurodiversity),
      iii. Varied ways that behavioral health issues have been viewed and treated over time and in the present,
      iv. Appreciating different perspectives of recovery and other ways of thinking about behavioral health,
      v. Knowing and sharing one's story of a recovery journey and how one's story can assist others in many ways,
      vi. Holistic approach to recovery addressing behavioral, emotional, and physical health, and
      vii. Overview of the Service Plan and its purpose.
   b. Advocacy and Systems Perspective:
      i. Overview of state and national behavioral health system infrastructure and the history of Arizona's behavioral health system,

  ii. Effective stigma reduction strategies - countering self-stigma, role modeling recovery, and valuing the lived experience,

  iii. Introduction to organizational change - how to utilize person-first language and energize one's agency around recovery, hope, and the value of Peer Support,

  iv. Creating a sense of community in a safe and supportive environment,

  v. Forms of advocacy and effective strategies – consumer rights and navigating the behavioral health system, and

  vi. Overview of the Americans with Disabilities Act (ADA).

 c. Psychiatric Rehabilitation Skills and Service Delivery:

  i. Strengths based approach, identifying one's own strengths and helping others identify theirs, building resilience,

  ii. Distinguishing between sympathy and empathy, emotional intelligence,

  iii. Understanding learned helplessness, how it is taught and how to assist others in overcoming its effects,

  iv. Introduction to motivational interviewing, communication skills and active listening,

  v. Healing relationships – building trust and creating mutual responsibility,

  vi. Combating negative self-talk - noticing patterns and replacing negative statements about one's self, using mindfulness to gain self-confidence and relieve stress,

  vii. Group facilitation skills, and

  viii. Introduction to Culturally & Linguistically Appropriate Services (CLAS) Standards, is the role of culture in recovery.

 d. Professional Responsibilities of the PRSS and Self Care in the Workplace:

  i. Professional boundaries and codes of ethics unique to the role of a PRSS,

  ii. Confidentiality laws and information sharing – understanding the Health Insurance Portability and Accountability Act (HIPAA) Responsibilities of a mandatory reporter, what to report and when,

  iii. Understanding common signs and experiences of mental illness, substance use, addiction, Opioid Use Disorder (OUD), and trauma,

  iv. Overview of commonly used medications and potential side effects,

  v. Guidance on proper service documentation, billing and using recovery language throughout documentation,

  vi. Self-care skills and coping practices for helping professionals, the importance of ongoing supports for overcoming stress in the workplace, resources to promote personal resilience, and

  vii. Understanding burnout and using self-awareness to prevent compassion fatigue, vicarious trauma and secondary traumatic stress.

2. PRSS employed in Community Service Agencies shall complete additional trainings as required in AMPM Policy 965. Peer support employment training programs shall not duplicate training required of individuals for employment with a licensed agency or Community Service Agency.

3. Contractors shall develop and make available policies and procedures as well as additional resources for development of curriculum, including Contractor staff contacts for questions or assistance.

E. **COMPETENCY EXAM**

Individuals seeking credentialing and employment as a PRSS shall complete and pass a competency exam with a minimum score of 80% upon completion of required training. Each PSETP has the authority to develop a unique competency exam. All exams shall include at least one question related to each of the curriculum core elements listed in Subsection D. If an individual does not pass the competency exam, the PSETP may allow the individual to retake or complete additional training prior to taking the competency exam again.

F. **INTER-STATE RECIPROCITY**

Individuals credentialed in another state shall submit their credential to AHCCCS/OIFA through the Contractor or employing provider. The individual shall demonstrate the other state's credentialing standards meet those of AHCCCS/OIFA prior to recognition of their credentials.

G. **SUPERVISION OF PEER/RECOVERY SUPPORT SPECIALISTS**

Contractors shall establish amount and duration of supervision of PRSS and follow the requirements outlined below:

1. Agencies employing PRSS shall provide supervision by individuals qualified as Behavioral Health Technicians or Behavioral Health Professionals. Supervision shall be documented and inclusive of both clinical and administrative supervision.

2. Contractors shall ensure supervisors of PRSS have adequate access to continuing education relevant to Peer Support.

3. Contractors shall develop and make available to the providers, policies and procedures regarding resources available to agencies for establishing supervision requirements and any expectations for agencies regarding Contractor monitoring/ oversight activities for this requirement.

H. **PROCESS FOR SUBMITTING EVIDENCE OF CREDENTIALING**

1. Contractors shall ensure provider agencies maintain documentation of required qualifications and credentialing for PRSS.

2. Contractors shall develop and make available to providers policies and procedures that describe monitoring and auditing/oversight activities where personnel files of PRSS are reviewed.

3. Contractors shall develop and make available to providers policies and procedures describing the process for submitting evidence of PRSS credentialing to AHCCCS/OIFA.